

EXHIBIT A

Claim

United States Bankruptcy Court for the Western District of New York
Rochester Drug Cooperative, Inc., Claims Processing Center
c/o Epiq Bankruptcy Solutions, LLC
P.O. Box 4420
Beaverton, OR 97076-4420

To submit your form online please go to <https://epiqworkflow.com/cases/RDR> Use your Mail ID for access.

Your Mail ID is as follows: 166212924

Name of Debtor: Rochester Drug Cooperative, Inc.
Case Number: 20-20230

Filed: USBC - Western District of New York
Rochester Drug Co-Operative, Inc. (B10)
20-20230 (PRW)

For Court Use Only



BAR(23) MAILID *** 000166212924 ***
RDR (CREDITOR.DBF,CREDNUM)CREDNUM # 1000000142*****
BAEDERWOOD PHARMACY
1585 THE FAIRWAY
NEFF DRUGS INC.
JENKINTOWN, PA 19046

RDR



0000000380

RECEIVED

AUG 24 2020

LEGAL SERVICES

Proof of Claim

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. With the exception of claims arising under section 503(b)(9) of the Bankruptcy Code, do not use this form to make a request for payment of an administrative expense. Such a request should be made by filing the separate administrative claim request form approved by the bankruptcy court. Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?

Name of the current creditor (the person or entity to be paid for this claim):

Baederwood Pharmacy

Other names the creditor used with the debtor:

2. Has this claim been acquired from someone else? ☒ No ☐ Yes. From whom?

3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?

Baederwood Pharmacy
Attn: Barry Neff

Name

1585 The Fairway

Number Street

Jenkintown PA 19046

City State ZIP Code

Country (if International):

Contact phone: 915.885.1417

Contact email: diane@neffpharmacy.com

Where should payments to the creditor be sent? (if different)

Name

Number Street

City State ZIP Code

Country (if International):

Contact phone:

Contact email:

4. Does this claim amend one already filed?

☒ No

☐ Yes. Claim number on court claims register (if known)

Filed on MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

☒ No

☐ Yes. Who made the earlier filing?

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?

☒ No

☐ Yes.

Last 4 digits of the debtor's account or any number you use to identify the debtor:

7. How much is the claim?

\$ 34546.00

Does this amount include interest or other charges?

☒ No

☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim?

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.

Stock Purchase

9. Is all or part of the claim secured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____ Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.) Amount necessary to cure any default as of the date of the petition: \$ _____ Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable	10. Is this claim based on a lease? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of petition. \$ _____ 12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Check one: <input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507 (a)() that applies. * Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.	11. Is this claim subject to a right of setoff? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____ A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority. Amount entitled to priority \$ _____ \$ _____ \$ _____ \$ _____ \$ _____
13. Does this claim qualify as an Administrative Expense under 11 U.S.C. § 503(b)(9)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9): \$ _____		

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☒ I am the creditor.
☐ I am the creditor's attorney or authorized agent.
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
☐ I am a guarantor, surety, endorser, or other co-debtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date

8 / 13 / 2020
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name

First name

Middle name

Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Number

Street

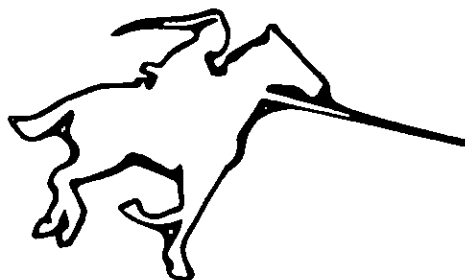
City

State

ZIP Code

Contact Phone

Email



INCORPORATED UNDER THE LAWS OF THE STATE OF NEW YORK

ROCHESTER DRUG CO-OPERATIVE, INC.

60,000 VOTING COMMON SHARES
PAR VALUE \$5.00 EACH

AUTHORIZED TO ISSUE 570,000 SHARES
10,000 NON-VOTING COMMON SHARES
PAR VALUE \$.01 EACH

500,000 PREFERRED SHARES
PAR VALUE \$5.00 EACH

The Corporation will furnish to any shareholder upon request without charge, a full statement of the designation, relative rights, preferences and limitations of each class of shares and series of shares authorized to be issued.

This Certificate that BAEDERWOOD PHARMACY INC. *is the owner of*

One (1)

fully paid and non-assessable Shares

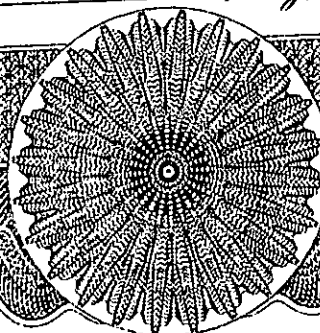
of the Non-Voting Common Shares of ROCHESTER DRUG CO-OPERATIVE, INC.

*transferable only on the books of the Corporation by the holder hereof in person or by
duly authorized Attorney upon surrender of this Certificate properly endorsed.*

*In Witness Whereof, the said Corporation has caused this Certificate to be signed
by its duly authorized officers and to be sealed with the Seal of the Corporation
this 29th day of March A.D. 2016*

[Signature]

Treasurer



[Signature]

THESE SHARES ARE SUBJECT TO THE BY-LAWS AND
RESTRICTIONS CONTAINED ON THE REVERSE SIDE HEREOF

The shares of stock represented by this Certificate are subject to: (i) redemption by the Corporation upon occurrence of certain events or for failure to meet certain requirements, as set forth in Paragraphs 3(e) and 3(i) of the Corporation's Certificate of Incorporation and Article V, Sections 4 and of the Corporation's By-Laws; (ii) the Corporation's first right of refusal to purchase any shares presented for transfer, as set forth in Paragraph 3(g) of the Corporation's Certificate of Incorporation and Article V, Section 7 of the Corporation's By-Laws; (iii) the Corporation's right to refuse to consent to the transfer of any shares until any indebtedness of the transferring shareholder to the Corporation is paid, as set forth in Paragraph 3(f) of the Corporation's Certificate of Incorporation and Article V, Section 7 of the Corporation's By-Laws; and (iv) the Corporation's right to offset against patronage dividends otherwise payable to the shareholder who is directly or indirectly indebted to the Corporation with respect to amounts which are in excess of 60 days past due as set forth in paragraph 3(j) of the Corporation's Certificate of Incorporation and Article V, Section 6 of the Corporation's By-Laws.

The securities represented by this Certificate have been acquired for investment and have not been registered pursuant to the Securities Act of 1933, as amended (the "Act") or any applicable state statute. Such securities represented by this Certificate may not be offered for sale, sold, pledged, hypothecated or otherwise transferred except to (i) an effective Registration Statement with respect to such securities under the Securities Act of 1933, as amended and in compliance with any applicable state securities laws; or (ii) an opinion of counsel in form satisfactory to the Corporation that the proposed transfer is exempt from the registration requirements of said Act and is compliance with any applicable state securities law.

The following abbreviations, when used in the inscription on the face of this certificate, shall be construed as though they were written out in full according to applicable laws or regulations. Additional abbreviations may also be used though not in the list.

TEN COM	- as tenants in common	UNIF GIFT MIN ACT	- Custodian _____ (Minor)
TEN ENT	- as tenants by the entireties	under Uniform Gifts to Minors Act	_____ (State)
JT TEN	- as joint tenants with right of survivorship and not as tenants in common	UNIF TRF MIN ACT	- Custodian _____ (Minor)
		under _____ (State)	Uniform Transfer to Minors Act

For value received, the undersigned hereby sells, assigns and transfers unto _____

PLEASE PRINT OR TYPEWRITE NAME AND ADDRESS OF ASSIGNEE

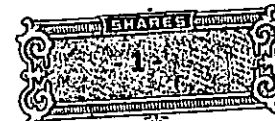
PLEASE INSERT SOCIAL SECURITY OR OTHER IDENTIFYING NUMBER OF ASSIGNEE

Shares

represented by the within Certificate, and hereby irrevocably constitutes and appoints _____ Attorney to transfer the said shares on the books of the within-named Corporation with full power of substitution in the premises.

Dated, _____ In presence of _____

NOTICE: The signature to this assignment must correspond with the name as written upon the face of the certificate in every particular without alteration or enlargement, or any change whatever.



INCORPORATED UNDER THE LAWS OF THE STATE OF NEW YORK

ROCHESTER DRUG CO-OPERATIVE, INC.

60,000 VOTING COMMON SHARES
PAR VALUE \$5.00 EACH

AUTHORIZED TO ISSUE 570,000 SHARES
10,000 NON-VOTING COMMON SHARES
PAR VALUE \$.01 EACH

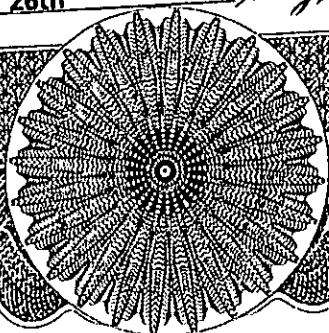
500,000 PREFERRED SHARES
PAR VALUE \$5.00 EACH

The Corporation will furnish to any shareholder upon request without charge, a full statement of the designation, relative rights, preferences and limitations of each class of shares and series of shares authorized to be issued.

This Certificate that Baederwood Pharmacy *is the owner of*
One (1) *fully paid and non-assessable shares*

of the Voting Common Shares of ROCHESTER DRUG CO-OPERATIVE, INC.
transferable only on the books of the Corporation by the holder hereof, in person or by
duly authorized Attorney upon surrender of this Certificate properly endorsed.

In Witness Whereof, the said Corporation has caused this Certificate to be signed
by its duly authorized officers and to be sealed with the Seal of the Corporation
this 26th *day of* February A.D. 2016



THESE SHARES ARE SUBJECT TO THE RIGHTS AND
RESTRICTIONS CONTAINED ON THE REVERSE SIDE HEREOF

The shares of stock represented by this Certificate are subject to: (i) redemption by the Corporation upon occurrence of certain events or for failure to meet certain requirements, as set forth in Paragraphs 3(e) and 3(i) of the Corporation's Certificate of Incorporation and Article V, Sections 4 and of the Corporation's By-Laws; (ii) the Corporation's first right of refusal to purchase any shares presented for transfer, as set forth in Paragraph 3(g) of the Corporation's Certificate of Incorporation and Article V, Section 7 of the Corporation's By-Laws; (iii) the Corporation's right to refuse to consent to the transfer of any shares until any indebtedness of the transferring shareholder to the Corporation is paid, as set forth in Paragraph 3(f) of the Corporation's Certificate of Incorporation and Article V, Section 7 of the Corporation's By-Laws; and (iv) the Corporation's right to offset against patronage dividends otherwise payable to the shareholder who is directly or indirectly indebted to the Corporation with respect to amounts which are in excess of 60 days past due as set forth in paragraph 3(j) of the Corporation's Certificate of Incorporation and Article V, Section 6 of the Corporation's By-Laws.

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			under _____ (State) Uniform Transfer to Minors Act

For value received, the undersigned hereby sells, assigns and transfers unto _____

PLEASE PRINT OR TYPEWRITE NAME AND ADDRESS OF ASSIGNEE

PLEASE INSERT SOCIAL SECURITY OR OTHER IDENTIFYING NUMBER OF ASSIGNEE

_____ Shares
represented by the within Certificate, and hereby irrevocably constitutes and appoints _____ Attorney to transfer the said shares on the books of the within-named Corporation with full power of substitution in the premises.

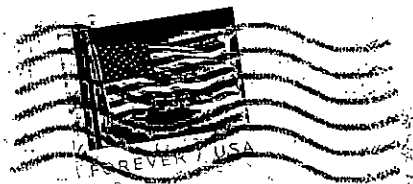
Dated, _____
In presence of _____

NOTICE: The signature to this assignment must correspond with the name as written upon the face of the certificate in every particular without alteration or enlargement, or any change whatever.

Neff Pharmacy Management Inc.
P.O. Box 2338
Jenkintown, PA 19046

PHILADELPHIA PA 190

19 AUG 2020 PM 10 L



Rochester Drug Cooperative Inc. Claims
Processing Center
c/o Epiq Bankruptcy Solutions LLC
P.O. Box 4420
Beaverton OR 97076-4420

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AUG 24 2020

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Description: Exhibit A-20 Claim 380, Page 8 of 8